


WT-11**Nonresident Entertainer's Report****ENTERTAINER**

Legal name of entertainer performing in Wisconsin		Entertainer's Federal ID Number or SSN	
Stage or professional name of nonresident entertainer			
Address			
City		State	Zip Code
Entertainer's Entity Type (<i>check one</i>) <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Limited Liability Company (LLC)  <input type="checkbox"/> Partnership <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation		If LLC is checked, indicate type <input type="checkbox"/> Disregarded (single member LLC only) <input type="checkbox"/> Taxed as Corporation <input type="checkbox"/> Taxed as Partnership	

EMPLOYER

Name		Telephone Number ()	
Address			
City		State	Zip Code

PERFORMANCE

Date of Performance	Location of Performance		
1. Total contract price (<i>see instructions</i>) 1 _____ 2. If lower rate was not granted, enter 6% (.06) 2 _____ 3. If lower rate was granted, indicate the percentage granted 3 _____ 4. Multiply Line 1 by Line 2 or Line 3, whichever is applicable. Enter on Line 4 4 _____ Amount of (<i>check one</i>): <input type="checkbox"/> bond <input type="checkbox"/> cash deposit <input type="checkbox"/> withholding			

I declare that this report is true, correct and complete to the best of my knowledge and belief.

Signature	Title	Date
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- Submit one copy to Wisconsin Department of Revenue with payment or surety bond.
- Print one copy for nonresident entertainer.
- Retain one copy for your records.

Wisconsin Department of Revenue
PO Box 8966
Madison WI 53708-8966

This space for Department use only

Receipt for: ☐ Surety Bond ☐ Cash Deposit \$ _____

Department Representative

Date